# DEPARTMENT OF SOCIAL SERVICES 744 P Street, Sacramento, CA 95814



December 3, 1997

ALL-COUNTY INFORMATION NOTICE: 1-72-97

TO:

ALL COUNTY WELFARE

DIRECTORS

ALL COUNTY CHILD WELFARE SERVICES ADMINISTRATORS

REA	SON FOR THIS TRANSMITTAL
[X]	State Law Change
[]	Federal Law or Regulation Change
[]	Court Order of Settlement
	Agreement
[]	Clarification Requested by One or
	More Counties
[]	Initiated by CDSS
	- -

SUBJECT: "OPTIONS FOR RECOVERY" PERINATAL PROGRAM FOSTER CARE COMPONENT

REFERENCE: ASSEMBLY BILL 67 AND WELFARE INSTITUTIONS CODE SECTION 16525

The purpose of this letter is to notify all counties that the "Options for Recovery" (OFR) Perinatal Program Foster Care Component is no longer a pilot project. Effective July 1, 1997, in accordance with the Governor's 97/98 Budget and Assembly Bill (AB) 67, the California Department of Social Services (CDSS) is pleased to announce that it has established the OFR Perinatal Foster Care component as a permanent, statewide program.

SEC. 51. Section 16525.10 of the Welfare and Institutions Code is amended to read:

16525.10 (a) In order to promote the development of placements that will allow children to move into more home-like environments, the department shall establish "Options for Recovery" as a permanent program. This program shall be available to any county that requests participation pursuant to procedures established by the department to the extent funds are made available through the Budget Act.

All counties are invited to apply for funding. The CDSS Foster Care Branch is in the process of establishing the new OFR Guidelines. Counties interested in participating in the OFR program will be asked to submit a county plan. Counties that are currently participating will be asked to submit a new plan for approval. The OFR program description, eligibility criteria and information about funding and where to send a letter of interest are as follows:

## OFR PROGRAM DESCRIPTION AND ELIGIBILITY CRITERIA:

In 1988, the Health and Welfare Agency convened representatives from the State Departments of Alcohol and Drug Programs (DADP), Health Services (DHS), Developmental Services (DDS) and CDSS in order to respond to the rising number of children that were being born substance-exposed and the need for additional alcohol and drug treatment services for pregnant and parenting women. These agencies were mandated to collaborate and consequently formed the State

Interagency Task Force on Perinatal Substance Abuse. The DADP administers the case management and treatment components for substance-abusing pregnant and parenting women. These components are permanently funded under the DADP Perinatal Services Network. The DHS and DDS provide ancillary services to women and children that are served by DADP and CDSS. And, CDSS administers the foster care component of the OFR program.

In accordance with the Welfare and Institutions Code (WIC) Section 16525, the eligibility criteria for the OFR program, foster care component is as follows:

# 16525.2 Eligible Child

- "Eligible child" means any child who meets the requirements of subdivision (a) or (b), and subdivision (c).
- (a) Any child who has a medically diagnosed condition or symptoms resulting from, or suspected as resulting from, substance abuse by the mother.
  - (b) Any child who is HIV positive.
- (c) Any child who meets the requirements of either subdivision (a) or (b) and who meets all of the following requirements:
  - (1) The child is a dependent child of the court.
  - (2) The child is aged newborn to 36 months.
- (3) The child is the child of a resident of an area served by a demonstration project pursuant to this chapter.

The following is a description of the OFR foster care local assistance service components.

Specialized Recruitment: Is provided by a specially hired county or contracted foster care recruiter. For each participating OFR county, the services are designed to meet the local need. Ideally, the foster care recruiter(s) should possess knowledge about and be proficient in the areas of cultural competency; substance abuse, addiction and the recovery process; codependency; prenatal substance-exposure; child protective services; family reunification and permanency planning; community based resources and organizations. The foster care recruiter is responsible for the recruitment of foster parents and federally-eligible relative caregivers; supervision of the respite and specialized training subcontracts; coordinates annually a cross-training event for social workers and alcohol and drug treatment providers; coordinates annually a two-day training event for foster parents and relative caregivers; maintains collaboration with the local alcohol and drug treatment agencies; and, acts as a liaison between the foster parents/relative caregivers, county and the state.

Specialized Training: For the foster parents/relative caregivers, training is either provided by the community colleges, private consultants and/or trainers that are subcontracted by the county. Depending upon the county OFR allocation, each county will provide a specified number of OFR trainings per year. The training curriculum consists of a mandated 33-hour core curriculum that was developed by CDSS. The current core curriculum includes instruction in: normal child development, chemical dependency and recovery, drug use effects on the developing fetus, Acquired Immune Deficiency Syndrome (AIDS), physical and developmental disabilities, special medical needs and Fetal Alcohol Syndrome/Fetal Alcohol Effects (FAS/FAE). Also, counties are given the flexibility to add other courses to the curriculum that meet the local need. To increase the effectiveness of the training curriculum, CDSS is in the process of reviewing all current OFR counties training programs. A modified 33-hour curriculum will be issued in the new OFR Guidelines.

OFR counties are also expected to provide a monthly support group for the foster parents and relative caregivers. The support groups are to include guest lecturers and address specific topics and problem areas for the foster parents/relative caregivers. This supportive training service has proven to be vital in assisting with the retention of foster parents and relative caregivers.

Respite Care Services: Upon completion of the core curriculum training, each family is eligible to receive 48 hours of respite per month. Under a three-tiered program, CDSS offers the county a range of options for providing respite care services. Tier I consists of the county subcontracting with a CDSS approved respite care agency to provide the services to the OFR families. Tier II - the county adopts the system whereby, foster parents and relative caregivers provide respite care for one another and/or utilize county approved caregivers to provide respite care services. Reimbursement to the foster parents, relative caregivers and/or approved caregivers is made by the OFR county, from their respite care budget. Tier III is a bartering system through which families provide respite care services for one another without charging a fee. It is the expectation of CDSS that all OFR counties will utilize a combination of the above Tiers to provide respite care services.

The CDSS may be willing to make an exception for those counties that cannot afford the 30 percent match required to provide 48-hours of respite per family per month. With justification, CDSS may approve counties to provide a minimum of 24-hours of respite care per month, per family. Counties that are approved to provide a lowered monthly rate of respite care are still required to meet the 30 percent match requirement.

Foster Parent/Relative Caregiver Training Conference: All participating OFR counties will be expected to provide an annual two-day foster parent/relative caregiver training event. This allows the OFR foster parents and relative caregivers an opportunity to exchange information and serves as a recruitment tool for prospective foster parents. Also, it provides the caregiver with training about self-care, expresses appreciation for a job well done, helps to prevent burnout and increases the retention rate of the foster parents and relative caregivers.

**Collaboration:** Between the state and local alcohol and drug treatment agencies has played a crucial role in the OFR pilot. It is expected that all participating OFR counties, social services agencies will collaborate at the local level with the alcohol and drug programs.

In coordination with CDSS, all OFR counties are to plan and implement an annual staff cross-training. This training will include social services administration and line social workers, alcohol and drug treatment providers, public health nurses, legal staff, foster parents, relative caregivers and birth parents. The objective of the cross-training is to increase collaboration at the local level and decrease the barriers that prevent agencies from working cooperatively to assist substance-abusing families.

## OFR FUNDING:

As cited in AB 67, the OFR program is established as a statewide, permanent program to the extent that funds are made available through the Budget Act. The CDSS will provide individual and/or regional funding allocations to counties that have an approved OFR plan. The allocations will be based upon the number of projected cases of court dependent, substance-exposed and/or HIV positive children that will enter the system on a monthly basis. For new counties, the first year allocation may be adjusted to allow up to six-months for a phase-in and start-up period.

The Governor's Budget for Fiscal Year (FY) 97/98 augmented the OFR program with \$4 million State General Fund (SGF). The total amount appropriated for the OFR program is \$13.2 million, which consists of \$2.2 million federal funds, \$7.7 SGF and \$3.3 million county funds. The OFR program is funded by a federal, state and county share consistent with the normal sharing ratio for child welfare services. Both, the recruitment and training components are funded with 50 percent/75 percent federal funds, respectively. The federally funded components (recruitment and training) will be subject to the non-federal discount rate that is obtained from the Administrative Expense Claim. There is not a federal share for the respite component as it is solely funded by state and county funds (see the chart below, for clarification of the funding percentages for each of the OFR local assistant services components).

The estimated county sharing ratio for each component is as follows:

	Federal	State	County
Recruitment	50%	35%	15%
Training	75%	17.5%	7.5%
Respite	0	70%	30%

Please be advised that a County Fiscal Letter (CFL) will be issued at a later date. County fiscal staff should confer with CDSS fiscal policy analyst, Donna Richardson at (916) 654-0958 to gain assistance with determining the exact amount of share ratio per program component.

## PROGRAM INFORMATION:

All counties that are interested in applying for OFR funding should submit a letter of intent by December 31,1997 to:

California Department of Social Services Attention: Lisa Lacy, OFR Program Consultant Foster Care Branch, Recruitment and Training Unit 744 P Street, M.S. 19-68 Sacramento, California 95814

If county participation requires the approval of your local Board of Supervisors, please include the appropriate approval documentation in your letter of intent. Also, include the designated county contact person's name and phone number. After we have received letters from all interested counties, the CDSS staff will arrange regional meetings to discuss the OFR Guidelines and the requirements for submitting a OFR county plan.

If you require additional information concerning the OFR program, please contact Lisa Lacy, Program Consultant of the Foster Care Branch at (916) 323-2929.

Deputy Director

Children and Family Services Division